										Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOR															
Effective October 1, 2004 / 12/8/4/ 10/050/22															
		S FILED -		SMAL TYPE	L EI		OR	OTHER SMALL							
TOTAL CLAIMS								·	RATE		FEE	1	RATE	FEE	
FOR				NUMBER FILED		NUMBER EXTRA			BASIC	FEE	395.00	OR	BASIC FEE	790.00	
TOTAL CHARGEABLE CLAIMS				minus 20=		•		l	× 2	5		OR			
INDEPENDENT CLAIMS				ininus 3 =		•			x'/00				×200		
MU	LTIPLE DEPEN	IDENT (	CLAIM P	RESENT					X 10.0			JOR		<del></del>	
				less these se		***********	V in anti-ma 9			0	<u> </u>	OR			
• If the difference in column 1 is less than zero, enter "0" in column 2									TOT	AT.	<u> </u>	OR		<b></b>	
	С			MENDE						SMALL ENTITY		OR	OTHER THAN		
(Column 1)				· (Colum			(Column 3)	1	JMA	_	ADDI-			ADDI	
AMENDMENT A	1/26/5	REMAINING AFTER AMENDMENT			PREVIO PAID I		PRESENT EXTRA		RATE		iional FEE	NAL.	RATE	TIONAL	
MON	Total	. 1	9	Minus	-/0	05	=		×2	5		OR	×50.		
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4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									╗					
									+ 180			OR	+360		
1	<b>\</b>									EE		OR	ADDIT. FEE		
هلہ	(Column 1) (Column 2) (Column 3)														
SAT B		REM	AINING TER	ļ~	PREVIO	BER	PRESENT EXTRA		RATI	<u> </u>	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Sid.	Total	: 48		Minus	. 10	<u> </u>	<u> </u>		x 2	5	· •	On.	x50.		
AF				Minus	,,,	<u> </u>	i , <u>)</u>	× 100				OR	200		
٢	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1					
• •									+18	0		OR	+360		
									TO	AL I		OR	TOTAL ADDIT FEE		
			· · · · · ·		·		61.5	-							
NT C	CLAIMS REMAINING AFTER AMENDMENT		HUME PREVIO PAID F		USLY EXTRA			RATE		ADDI- TIONAL FEE		RATE	FLONAL TIONAL FEE		
AMENDMENT	Total	•		Minus ·	44		= :	]	×∂	5	·	OR	×50		
MEN	Independent	•		Minus	***		=	)	× 10				x200		
2	FIRST PRESE	ОТАТИ	N OF MU	JLTIPLE DEJ	PENDENT	CLAIM		].		1		OR	24.0		
	•	- <del></del> -	•						+ 180	i.		OR	+360		
	i the entry in colu I the "Highes: Ru	mber Pre	viously Fa	ud For IN THI	S SPACE &	s less tha	n 20, enter 70.		101 0011. F			OR	TOTAL ADDIT. FEE		
	ff the "Highest Nu The "Highest Num	rhber Previber Prev	rviously Pa lously Pai	aid For IN THI d For (Total o	S SPACE I	s less tha enl) is the	n 3, enter ' highest n' '			•	ropriate box	in opt	tumn 1		

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